

Gender Pay Gap Report 2020



Message from Ian Abbs, Chief Executive

This is the fourth Gender Pay Gap Report for Guy's and St Thomas' NHS Foundation Trust. We see this as a valuable complement to the range of employment data which the Trust collects and analyses to monitor diversity of all kinds, and address inequalities. As with any data, its value is in the awareness it raises, the questions it prompts, and the action we take.

We serve diverse local communities across the London boroughs of Lambeth and Southwark and further afield. This diversity is reflected in the profiles of both our patients and our workforce, and brings many benefits. It is important to acknowledge that inequalities remain. In accordance with the Equality Act 2010 and the Trust's public sector equality duties, we are committed to providing services and employment opportunities which are inclusive across all strands of equality – age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation. In this report, we set out the statistics we are required to publish under the reporting regulations, along with some of the analyses we have undertaken to help us to understand our results. We do recognise that, for a growing number of people, gender doesn't simply refer to male or female. For the purposes of this report, though, our gender pay gap is calculated using the approach as required by The Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017, this report compares the pay of female employees to that of male employees

In common with the wider NHS, the Trust's workforce is predominantly female and I am proud that this is reflected in our senior leadership team. We have made good progress, so we are encouraged to see that our gender pay gap is smaller than was the case in our report for 2019, however the Trust continues to have a gender pay gap.

We have identified two significant drivers behind our gender pay gap: the uneven distribution of men in our overall workforce, and the higher number of male than female consultant doctors in the upper quartile of our pay distribution. We continue to scrutinise our gender pay gap data, foster honest conversations and build on the insights from our first report. We are identifying and addressing any inequalities in career opportunities between male and female staff. The underrepresentation of women in Consultant roles is a national challenge, and we are committed to addressing this and ensuring that our senior management group reflects the diversity of the wider organisation and patient population.

Ian Abbs
Chief Executive
Guy's and St Thomas' NHS Foundation Trust

Overview of the requirements

On 31 March 2017, it became mandatory for public sector organisations with more than 250 employees to report annually on their gender pay gap. The public sector deadline for publication of the data is 30 March each year, with calculations based on a 'snapshot date' of the previous 31 March.

The requirement is to publish six key measures of the gender pay gap:

Mean gender pay gap	The difference between the mean hourly rate of pay of male full-pay relevant employees and that of female full-pay relevant employees
Median gender pay gap	The difference between the median hourly rate of pay of male full-pay relevant employees and that of female full-pay relevant employees
Mean bonus gap	The difference between the mean bonus pay paid to male relevant employees and that paid to female relevant employees
Median bonus gap	The difference between the median bonus pay paid to male relevant employees and that paid to female relevant employees
Bonus proportions	The proportions of male and female relevant employees who were paid bonus pay during the relevant period
Quartile pay bands	The proportions of male and female full-pay relevant employees in the lower, lower middle, upper middle and upper quartile pay bands

The information must be published on a website that is accessible to employees and the public free of charge, and it should remain on the website for a period of at least three years from the date of publication.

What is the gender pay gap?

The gender pay gap is the average earnings difference between all male employees and all female employees in an organisation, regardless of the nature of their work.

It is important to distinguish between the gender pay gap and equal pay. Equal pay concerns differences between the actual earnings of male and female employees doing like work, or work of equal value.

An organisation may be an equal pay employer, paying male and female staff equally for doing equal work, and it may still have a gender pay gap. This is because, while male and female employees doing like work or work of equal value are paid equally, there are different numbers of male and female employees doing different work for which they are paid differently.

Calculating the gender pay gap

The 'snapshot date' for our third gender pay gap report is 31 March 2020, with data based on the relevant pay periods of March 2020 for ordinary pay and the 12 months to 31 March 2020 for bonus pay.

For gender pay gap reporting, employees are those employed under a contract of employment, a contract of apprenticeship or a contract personally to do work. This includes those under NHS terms and conditions, medical staff and very senior managers (VSM).

Our gender pay gap

There is decrease in the gender pay gap figures compared to the figures reported for 2019:

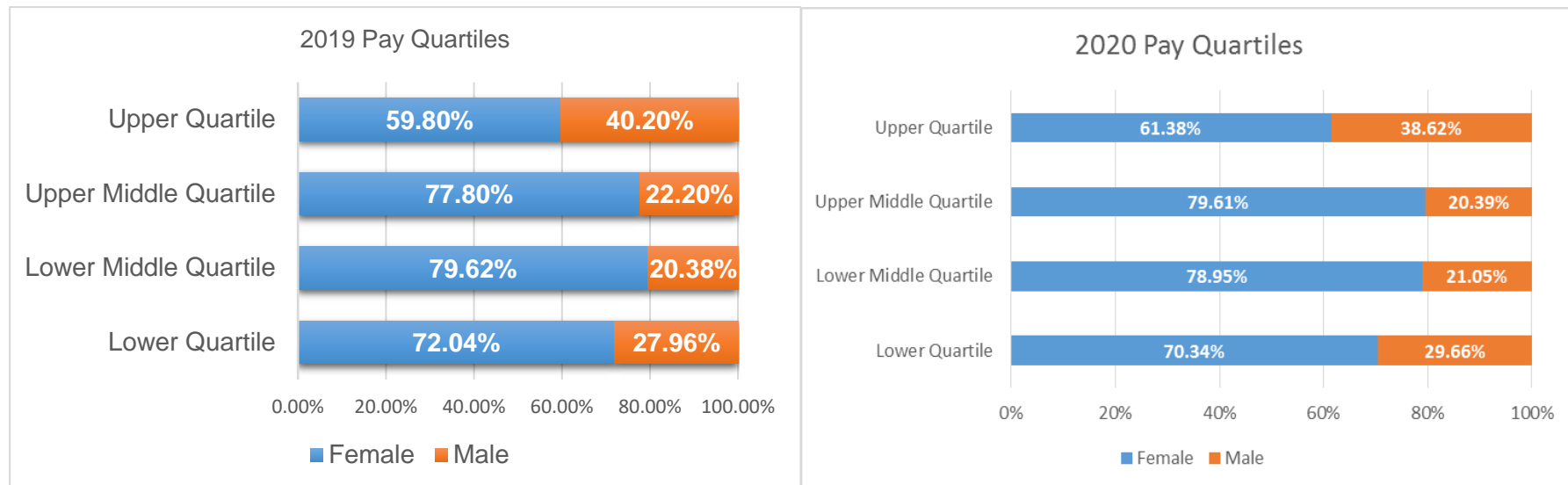
	Women's earnings in 2019:	Women's earnings in 2020:
Mean gender pay gap in hourly pay	18.8% lower	15.56% lower
Median gender pay gap in hourly pay	13.2% lower	10.13% lower

To understand the pay gap, it is helpful to look more closely at the pay quartile data, and the distribution of male and female staff across professional grades.

Pay quartiles

Pay quartiles are calculated by ranking the hourly pay rates for each employee from lowest to highest, before splitting the ranking into four equal-sized groups and calculating the percentage of males and females in each group.

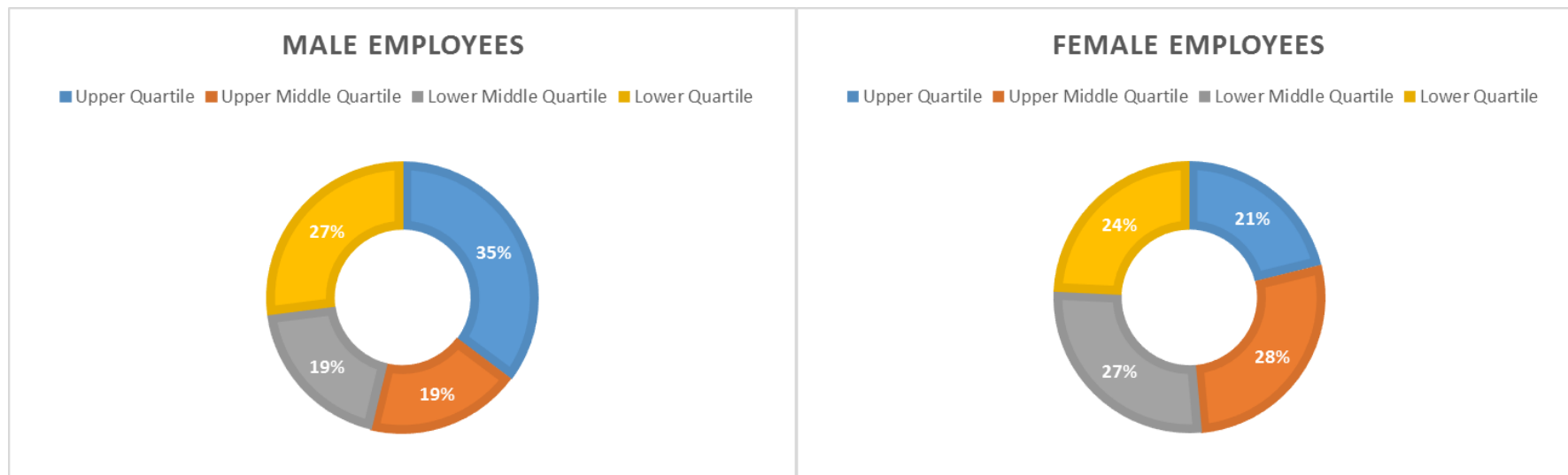
Like the NHS workforce as a whole, Guy's and St Thomas' workforce is predominantly female, with 72.32% of staff female and 27.68% male. Gender splits for the middle pay quartiles are very similar, approximately 80% female and 20% male. While female employees significantly outnumber male employees in all four quartiles, the upper quartile has the highest proportion of male employees – 38.62% – and is a clear indicator of why male median pay exceeds female median pay.



The NHS pay system is a series of nationally negotiated pay scales. There are separate scales for doctors and dentists in training and consultants. For non-medical staff, including nursing and allied health professionals as well as administrative and clerical staff, there is a single pay scale divided into 12 pay bands. An employee's pay point on their pay scale is determined by years of experience and, in the case of non-medical and dental staff, the band of the post as determined by the NHS job evaluation scheme.

While this pay system safeguards against equal pay issues, there is a gender pay gap owing to the distribution of male and female employees. The impact of the top-heavy distribution of male employees is to skew male median pay higher than female median pay, even though male employees are significantly outnumbered by female employees in all four pay quartiles.

Distribution of male and female employees in the pay quartiles



With more than one third of male employees falling in the upper quartile of hourly pay rates, the median male hourly pay rate falls in the upper middle quartile of all data, whereas the median female hourly pay rate falls in the lower middle quartile. The pay gap is further distorted by the wide range of upper quartile pay rates, with male data more sensitive to this distortion than female data.

Distribution of male and female employees by professional grade

Professional Grade	Female Headcount	Females as % Of Grade	Male Headcount	Males as % of Grade	Total Headcount
Ad Hoc Payscale (non AfC Tupe'd in staff)	13	48.15%	14	51.85%	27
Apprentice	24	82.76%	5	17.24%	29
Band 1	13	72.22%	5	27.78%	18
Band 2	905	63.96%	510	36.04%	1415
Band 3	1539	72.32%	589	27.68%	2128
Band 4	1073	76.26%	334	23.74%	1407
Band 5	2319	81.91%	512	18.09%	2831
Band 6	2366	82.73%	494	17.27%	2860
Band 7	1754	77.23%	517	22.77%	2271
Band 8a	672	69.71%	292	30.29%	964
Band 8b	188	57.49%	139	42.51%	327
Band 8c	141	69.12%	63	30.88%	204
Band 8d	57	55.88%	45	44.12%	102
Band 9	22	55.00%	18	45.00%	40
Very Senior Mgt	35	54.69%	29	45.31%	64
Consultant	516	46.65%	590	53.35%	1106
Associate Specialist	15	68.18%	7	31.82%	22
Foundation Doctor	80	57.97%	58	42.03%	138

Specialist Registrar	124	56.36%	96	43.64%	220
Specialty Doctor	71	65.14%	38	34.86%	109
Specialty Registrar	206	59.71%	139	40.29%	345
Trust Grade	225	55.97%	177	44.03%	402
Grand Total	12358	72.57%	4671	27.43%	17029

Male consultants make up 37% of male employees and 15% of all employees in the upper pay quartile; female consultants represent 20% of females and 12% of all in the upper quartile. As the hourly pay rate of Consultants falls in the upper quartile, this group of staff in the male population disproportionately inflates male median pay.

Consultants are the only male-dominated professional grade in the Guy's and St Thomas' workforce. The distribution table above shows that within the medical staff group women are overrepresented in all grades other than consultant grade. This is mirrored nationally, in 2018 an independent review, was commissioned by the Department of Health and Social Care to advise on action to improve gender equality in the NHS. This showed two-thirds of doctors in training grades are women, but within consultant grades this drops to under half. The underlying causes of the gender pay gap, include the impact of motherhood and women's career progression while working irregular hours or part-time.

The effect of removing Consultants from the median gender pay gap calculation reduces the gap to 0%.

Proportion of male and female employees receiving a bonus payment

Male staff receiving bonus	6.01%
Female staff receiving bonus	1.15%

The Trust does not pay traditional performance bonuses. For the purposes of gender pay gap reporting, clinical excellence awards (CEAs), for which only medical and dental consultants are eligible are considered as bonus pay. From 1 April 2018, and in order for the Trust's gender pay gap reporting to be consistent with that of other NHS employers, it was agreed that all CEAs should be

treated as bonus payments. The percentage of male staff receiving a bonus has increased slightly from 5.69% in the 2019 report, to 6.01% in the 2020 report while the percentage of female staff receiving a bonus has also increased slightly from 1.13% in 2019 to 1.15% in 2020.

Our bonus pay gap in 2020

Women's bonus payments are:

Mean bonus gender pay gap	32.78% lower
Median bonus gender pay gap	33.33% lower

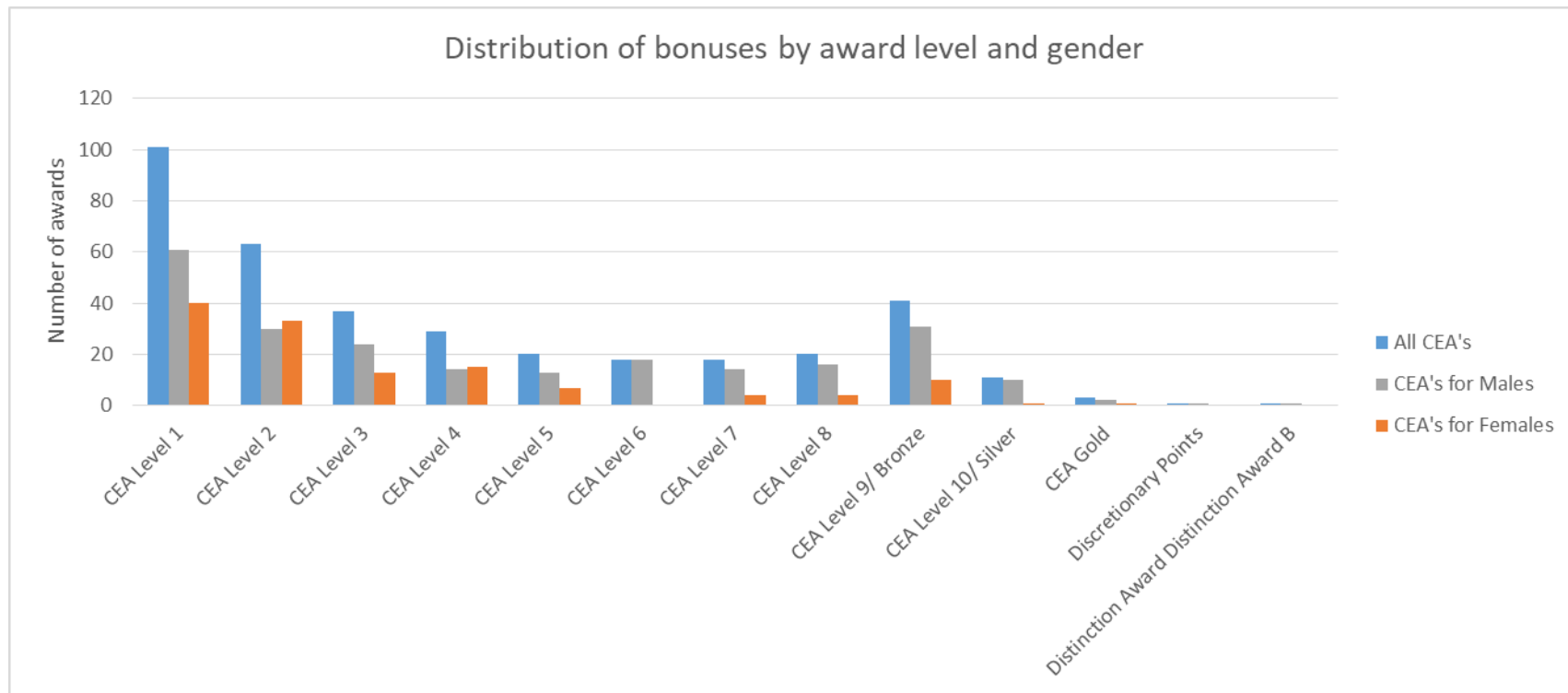
The Trust's bonus gender pay gap in 2020 is calculated on a population of 363 consultants – 235 male and 128 female – in receipt of CEA payments. The values are not annualised, therefore a consultant who joined the Trust part-way through the year or who works part-time will be included in the calculation with less than the full annual value. Of the 235 male consultants in receipt of CEAs, 34 work less than full time, or 14.47%, while 39 of 128 female consultants in receipt of CEAs, 30.47%, work less than full time. In combination with a greater number of CEAs being held by male consultants, this is a contributory factor to the bonus gap.

CEAs are not awarded automatically, but must be applied for and are given for quality and excellence, acknowledging exceptional personal contributions. The government Consultation on the national CEA scheme reported women are much less likely to self-promote than men, analysis of the Trust's data on its local CEA awards also indicated that female consultants are less likely to apply than male consultants, and they apply less frequently than male consultants.

CEA's have been halted as a result of the COVID-19 pandemic, with the award money due to be distributed equally among eligible consultants this year. The result of this change will be visible in the March 2021 gender pay gap report.

Distribution of clinical excellence awards by award level and gender 2020

Award level	Number of awards	CEA's for females	Awards to female as percentage of all awards	CEA's for males	Awards to male as percentage of all awards
CEA Level 1	101	40	11.02%	61	16.80%
CEA Level 2	63	33	9.09%	30	8.26%
CEA Level 3	37	13	3.58%	24	6.61%
CEA Level 4	29	15	4.13%	14	3.86%
CEA Level 5	20	7	1.93%	13	3.58%
CEA Level 6	18	-	-	18	4.96%
CEA Level 7	18	4	1.10%	14	3.86%
CEA Level 8	20	4	1.10%	16	4.41%
CEA Level 9/ Bronze	41	10	2.75%	31	8.54%
CEA Level 10/ Silver	11	1	0.28%	10	2.75%
CEA Gold	3	1	0.28%	2	0.55%
Discretionary Points	1	-	-	1	0.28%
Distinction Award Distinction Award B	1	-	-	1	0.28%
Grand Total	363	128	35.26%	235	64.74%



How we are supporting equality of opportunity, diversity and inclusion in our workforce

Our commitment

Guy's and St Thomas' is firmly committed to meeting the aim of the NHS constitution and providing an equally welcoming to people of all backgrounds, cultures, nationalities and religions. Our equalities objectives set out our priorities to drive improvements in patient care, staff experience and reduce inequalities for our diverse workforce and patient population.

Embedding our values in everything that we do

Our Values and Behaviours Framework describes what it means for every one of us in the Trust to put our values into action. Our values are a key part of everything that we do as an organisation, from being included in staff job descriptions and in our publications, through to our work on leadership development, our apprenticeship programmes, corporate induction, recruitment, appraisals, day-to-day performance management and HR policies

Providing high-quality apprenticeships

We've seen continued success in our wide range of apprenticeships designed to give talented people an opportunity to gain a nationally-recognised qualification while completing on-the-job training with our skilled staff members. We have won multiple awards for our programmes, and our apprenticeships are endorsed by our senior leaders.

Having open conversations and raising awareness

We provide a variety of ways for our staff to engage, learn and take away practical examples of how unconscious biases can influence decision-making. Training is provided at the point of induction and through continuous learning and development. We provide equality, diversity and inclusion training that enhances both staff awareness during recruitment processes and HR processes, as well as in our daily interactions with, and care for, patients.

We will promote visible role-modelling of under-represented groups in particular professions and will hold open sessions to encourage higher numbers of applications for CEAs from female consultants through understanding the potential barriers to their applying.

Supporting staff through coaching and mentoring

Our award-winning coaching and mentoring service is the largest internal coaching and mentoring service within the NHS and is designed to release the talent of staff within our organisation. The service is readily accessible and coaches and mentors are available to support clearly-defined development needs identified in staff performance appraisals.

We also have a Reverse Mentoring programme with junior staff mentoring senior staff, sharing their experience of challenges or barriers they have seen or felt. Our senior leaders are committed to ensuring there is equality and equity of opportunity, we are also seeing this in our senior leaders role modelling compassionate and inclusive behaviour.

Developing fair recruitment practices to ensure equal access to employment opportunities for all

We are committed to the Department of Work and Pensions' Disability Confident scheme, designed to enable the recruitment and retention of people with disabilities and health conditions based on their skills and talent. All jobs are advertised equitably including diverse shortlisting and interview panels to remove bias and generate diversity of thought and experience.

Improving accessibility to information and employment opportunities

We are committed to attracting and retaining a diverse, highly skilled and productive workforce whilst providing the highest possible standard of accessible healthcare to our patients. To achieve this, we have:

- An inclusive network 'Women in Essentia' open to all staff. The focus of the network is to help promote diversity and the development and progression of women within the organisation.
- Guy's and St Thomas' hosts the local branch of the South East London Women's Leadership Network. This is a place to bring together colleagues from across different organisations for networking, support and personal and professional development.
- Provide coaching and mentoring to all staff to support professional and personal development.
Facilitated a bespoke positive pathway development programme for staff from black, Asian and minority ethnic backgrounds.
- Embraced and celebrated the diversity of our staff and positively endorse development of cultural competence through reverse mentoring and workshops on bias, micro aggression and ally ship.
- Deliver a suite of leadership and management programmes to support progression.

- a comprehensive web-based accessibility guide for patients and visitors to our Trust, including meeting the accessible information standard
- Run work experience and widening participation programmes for vulnerable or at-risk individuals from our local community
- It is embedded in the Trust that all interviews for senior positions are conducted by a diverse panel to ensure diversity of perspectives, and promote and embrace the diversity of our workforce and those we recruit.

Participating in the Department of Work and Pensions' Access to Work scheme

This scheme supports staff returning to work after a period of ill health or if they have or have developed a disability or long term health condition. The Trust provides guidance to managers and all staff about the scheme as well as funding to make appropriate adjustments in the workplace. Our occupational health team also has a dedicated rehabilitation nurse manager to support staff who develop physical disabilities or long-term conditions during their employment. In addition to staff support through the Employer Assistance programme and our showing we care about you programme.

Building internal networks

Our staff networks exist to promote a positive working environment, free from fear of discrimination or prejudice and in which career opportunities are accessible on an equal basis to all. Our Black Asian minority ethnic (BAME) Network is open to all staff from BAME backgrounds and allies, and those with a positive interest in driving forward race equality. Our vibrant Lesbian, Gay, Bisexual and Transgender + (LGBT+) staff forum meets regularly to discuss key issues and initiatives, and organise social events, to support our LGBT+ colleagues; all staff, including allies, are welcome. Our Disability forum brings together staff who either have a disability or long term condition, sharing experiences and working together to see how practices can be amended to ensure staff are able to continue to work and be supported. A growing Dyslexia forum is helping to raise awareness of neurodiversity and learning difficulties and to improve the support available both in assisted technology as well as mental coping strategies. A south East London Women's leadership group, bringing together shared insight, learning and leadership across industry to support the development of women and raise awareness with allies. Working in collaboration across the networks ensures we are supporting intersectionality.

Developing our people, from managers to leaders

We understand the importance of developing our managers so they can build great teams. We also know that what it takes to be effective at one level of leadership differs significantly from the next – different skills are needed for different levels. We have therefore created opportunities for leaders at all levels to take steps towards senior management. Our programmes include Aspiring Team Leader aimed at staff who have not yet secured their first management role; Passport to People Management which is our flagship programme for all Line Managers; and Operational Team Leader incorporating Leadership Masterclasses which are for middle-grade managers aspiring towards senior leadership roles. We support our internal programme by offering longer-term apprenticeship-funded opportunities for staff to obtain accreditations at Diploma Levels 3 and 5, Degree (Level 6) and Masters (Level 7). Our Leadership & Management offering sits alongside our positive pathways programme which is designed to build capability and confidence in under-represented staff to enable them to realise their potential and progress their careers. We also have two talent programmes – one to develop future operational leaders (Management Trainee Scheme) and an Aspiring Executive Directors scheme supported by an MBA qualification.

Enabling flexible working

We are committed to supporting all staff to achieve an effective balance between work and life's other needs, while continuing to meet the needs of our services. We have recently updated our flexible working policy, providing clarification around the role of staff and management in handling new and existing flexible working arrangements in order to ensure that as many staff as possible are able to benefit from the policy.

In May 2019 a flexible working task and finish group was established to take a fresh look at our flexible working approaches. The flexible working task and finish group has the goal of making flexibility open to everyone through encouraging open discussions about between employees, teams and their managers and providing tools, case studies and practical support to help create working patterns that meet the needs of both staff and services. The aims of the working group are nicely summed up within the strapline 'happy to talk flexible working'.

Conclusion

As in the last year of reporting, there is a gender pay gap within the Trust, with mean and median women's pay 15.56% and 10.13% lower than men's pay respectively, this is an improvement on the 2019 mean and median pay gap of 18.8% and 13.2%. We remain confident that we have identified two key drivers of our pay gap: the uneven distribution of men in our overall workforce,

and the higher number of male consultants than female consultants in the upper quartile of our pay distribution – removing consultants from the data set eliminates the median pay gap, reducing it to 0%. The underrepresentation of women in Consultant roles is a national and long term challenge, and we are committed to addressing this. The Trust has introduced a package of support for consultants generally, and for female consultants in particular and despite the non-competitive nature of the LCEAs award for 19/20, the Trust will continue to support female Consultants through tailored workshops, focusing on submission of written applications and peer to peer support for any future competitive rounds. .